

**ILLINOIS DEPARTMENT OF PUBLIC HEALTH (Department)
UNIFORM DO-NOT-RESUSCITATE (DNR)/
PRACTITIONER ORDERS FOR LIFE-SUSTAINING TREATMENT
(POLST) ADVANCED DIRECTIVE**

Guidance for Health Care Providers and Professionals

The Illinois Department of Public Health Uniform Do-Not-Resuscitate (DNR)/Practitioner orders for life-sustaining treatment (POLST) Advance Directive can be used to create a practitioner order that reflects an individual's wishes about receiving *cardiopulmonary resuscitation (CPR)* and *life-sustaining treatments such as medical interventions and artificial administered nutrition*. It allows an individual, in consultation with his or her health care professional, to make advance decisions about CPR and other life-sustaining decisions, in the event the individual's breathing and/or heartbeat stops or based on the patient's medical condition and preferences.

The Department form is intended to be honored across various settings, including hospitals, nursing homes, and by emergency medical services personnel in the individual's residence or en route to a health care facility. The Department Uniform DNR/POLST Advance Directive should be used to replace the previous Department Uniform Do-Not-Resuscitate (DNR) Advance Directive. Properly executed prior versions of the Department Uniform DNR Advance Directive are still valid. However, the new Department form has been expanded to provide individuals with more choices and is intended to qualify as a Practitioner Order for Life Sustaining Treatment document.

The Department Uniform DNR/POLST Advance Directive should be completed only after detailed discussion about treatment preferences with the individual or, if the individual lacks decision-making capacity, with the individual's legal representative. Items for discussion with your patient should include the patient's preferences regarding administration of CPR if his or her heartbeat and/or breathing stop or if other life-sustaining treatments are desired, in view of the following:

- The patient's personal views
- The patient's medical condition and related medical considerations
- The patient's views regarding use of CPR in the event of an unforeseen accident (such as a car crash or choking on food)
- The patient's quality of life issues before and after CPR
- The patient's views regarding use of CPR during surgery or other medical procedure
- The patient's wishes regarding organ donation
- The patient's views regarding use of a mechanical ventilator
- The patient's wishes for life-sustaining treatments

An individual is not required to consent to a DNR/POLST order as a condition of

treatment or care. DNR/POLST orders are always voluntary and may be changed by a patient or his/her lawful representative at any time.

I. General Considerations

Are health care providers required to honor a DNR/POLST order completed on the Department Uniform DNR/POLST Advance Directive?

Licensed hospitals, certain licensed long-term care facilities such as nursing homes, and licensed emergency medical services personnel must honor the Department Uniform DNR/POLST Advance Directive document, or a copy of that document.

How may the new Department Uniform DNR/POLST Advance Directives be obtained?

Forms may be downloaded from the Department's website at www.dph.illinois.gov/topics-services/health-care-regulation/nursing-homes/advance-directives.

Are photocopies of the Department Uniform-DNR/POLST Advance Directive valid?

Generally, yes. Photocopies of a completed Department Uniform DNR/POLST Advance Directive are valid. Each health care facility, however, may have different policies on whether copies of DNR/POLST orders completed on a form other than a Department Uniform DNR/POLST Advance Directive are accepted as valid. It is advisable to check with a health care facility regarding its DNR policy.

II. Completing and Reviewing the Department Uniform DNR/POLST Advance Directive

When is the best time to discuss the form with an individual?

Although it is not always possible, the ideal time for discussion is when the individual is alert and able to fully understand and articulate his or her wishes about end-of-life care.

Who may consent to a DNR/POLST order?

Consent may be obtained from the individual, or from another person legally authorized to act on that person's behalf such as the individual's legal guardian, agent under a power of attorney for health care or a surrogate decision maker. A parent or legal guardian typically may consent to a DNR/POLST order for a minor. Emancipated minors also may consent to a DNR/POLST order.

Does the Department Uniform DNR/POLST Advance Directive require the signature of the person who is consenting to the DNR/POLST order?

Yes. The patient or his or her authorized legal representative must sign the section of the

form concerning consent to the DNR/POLST order.

Why does the individual (or his or her legal representative) and a practitioner sign the Department Uniform DNR/POLST Advance Directive?

The law authorizing the development of the form specifies that an individual (or his or her authorized legal representative) may execute the Department Uniform DNR/POLST Advance Directive. The form is also a practitioner's order, which requires a practitioner's signature to be carried out by health care providers.

Is a witnesses required for the Department Uniform DNR/POLST Advance Directive?

Yes. One individual, 18 years of age or older, must witness the signature of the patient or his/her legal representative's consent on the Department Uniform DNR/POLST Advance Directive. A witness may include a family member, friend or health care worker.

Is the order valid if the second page of the form has not been completed?

Yes. The order can be valid even if the second page of the form has not been completed. The second page is for informational purposes only.

What if an individual decides to revoke a DNR/POLST order?

An individual or his or her legal representative can revoke a DNR/POLST order. The DNR/POLST order can generally be revoked in a variety of ways, such as by writing "VOID" in large letters across the first page of the form or by destroying the document and all copies. The revocation decision also should be communicated to the individual's health care professionals and providers, and to family members.

III. Implementing a DNR/POLST Order on a Department Uniform DNR/POLST Advance Directive

Does the law address the potential liability of a health care provider or professional in connection with implementing a DNR/POLST order on the Department Uniform DNR/POLST Advance Directive form?

Subsection (d) of Section 65 of the Health Care Surrogate Act, 755 ILCS 40/65, provides:

"A health care professional or health care provider may presume, in the absence of knowledge to the contrary, that a completed Department of Public Health Uniform DNR/POLST Health Care Surrogate Act, 755 ILCS 40/65 Order or a copy of that form is a valid DNR/POLST Order. A health care professional or health care provider, or an employee of a health care professional or health care provider, who in good faith complies with a do-not-resuscitate or life-sustaining treatment order made in accordance with this Act is not, as a result of that compliance, subject to any criminal or civil liability, except for willful and wanton misconduct, and may not be found to have committed an act of

unprofessional conduct.”

Are DNR/POLST orders ever suspended during a surgery or other medical procedures?

Certain health care providers in Illinois have written policies indicating that a DNR/POLST order may be suspended during a surgical procedure after discussion with the individual or the individual’s legal representative. Further, a patient’s wishes regarding applicability of a DNR/POLST order during surgery or in the event of an unforeseen accident (such as a car crash or choking on food) may be placed on the Department Uniform DNR/POLST Advance Directive form in the space designated for “Additional Orders.” You should discuss these issues with your doctors and health care providers.

The Illinois Department of Public Health has provided this guidance document for general informational purposes. Because each individual situation is different and key facts can so often change the outcome, additional questions should be directed to a licensed attorney, as the Department cannot provide legal advice.